



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
2300 E STREET NW
WASHINGTON DC 20372-5300

Canc: Jun 2004
IN REPLY REFER TO
BUMEDNOTE 1524
NMETC-OGMC
18 Jun 2003

BUMED NOTICE 1524

From: Chief, Bureau of Medicine and Surgery
To: Ships and Stations Having Medical Department Personnel

Subj: 2003 GRADUATE MEDICAL EDUCATION SELECTION BOARD (GMESB)
APPLICATION AND GUIDANCE FOR GME-2+ (RESIDENCY AND
FELLOWSHIP) AND NONCLINICAL POSTGRADUATE EDUCATION

Ref: (a) BUMEDINST 1524.1A
(b) SECNAVINST 1520.11
(c) SECNAVINST 7220.75C
(d) DOD Instruction 6000.13 of 30 Jun 97

Encl: (1) 2003 GMESB Projected GME-2+ Full-Time Inservice (FTIS) Selection Goals for
Academic Year 2004
(2) 2003 GMESB Projected Full-Time Outservice (FTOS) and Other Federal Institution
(OFI) Selection and Preselection Goals
(3) Department of Defense Application for Graduate Medical Education (GME)
(4) 2003 Navy Supplement to DOD Application for GME
(5) Curriculum Vitae Format for DOD GME Application
(6) Summary of Active Duty Obligation (ADO) for GME

1. Purpose. To announce application procedures for academic year (AY) 2004 Navy-sponsored GME-2+ Graduate Medical Education (GME) Programs per references (a) and (b), and for nonclinical postgraduate education for Medical Corps officers.

2. Important Dates

01 Jul 03	Web application activated
15 Sep 03	Deadline to submit Web application
17 Oct 03	Deadline for application changes and supporting documents
01 Dec 03	GMESB Convenes
17 Dec 03	GMESB Results Release
12 Jan 04	Deadline for acceptance of training

3. Background. Applications are submitted over the Internet and are due by 15 September 2003. Selections for AY 2004 GME programs will be made at the 2003 GMESB, convening in Alexandria, VA, from Monday, 1 December through Friday, 5 December 2003. Application processing and GMESB planning are managed by the Naval Medical Education and Training Command (NMETC).

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a. Army, Navy, Air Force, Uniformed Services University of the Health Sciences (USUHS), and DOD GME representatives will meet at the eleventh annual Joint Service Graduate Medical Education Selection Board (JSGMESB). The Army will host the 2003 JSGMESB and each Service will simultaneously convene selection boards to jointly score and select applicants and ensure full use of GME positions to strengthen GME programs across all three Services.

b. The flight surgery (FS) and undersea medicine (UM) selection committees are an integral part of the annual GMESB, but a separate BUMED Notice 1520 provides application guidelines for FS and UM officer training. Questions pertaining to the FS program application and application process should be referred to (202) 762-3456 or DSN 762-3456 for FS and Aerospace Medicine questions. Questions pertaining to the UM application and application process should be directed to (202) 762-3444, or DSN 762-3444.

c. National Capital Consortium (NCC) GME programs with designated Navy training positions are considered FTIS Programs.

4. GMESB Selection Process

a. Selection Board. The GMESB is an administrative board governed by a formal precept issued annually by the Chief, BUMED and approved by the Commander, Navy Personnel Command (COMNAVPERSCOM). The precept appoints the GMESB President (a Medical Corps flag officer) and voting members comprised of senior Medical Corps officers assigned to medical treatment facilities, operational or overseas units, and representing the operational medicine, primary care, academic, and research communities.

b. Precept. The precept provides guidance for selecting Navy GME applicants, establishes the number of medical officers to be selected, delineates the specialties and programs for which applicants may be selected, and establishes the number of selections allowed for each specialty in FTIS, FTOS, OFI, and Navy Active Duty Delay for Specialists (NADDS) training pathways.

c. Specialty Committees and Panels. Joint Service Selection Panels comprised of program directors, specialty leaders, and consultants in designated specialties from all three military medical department Services, will meet to review records and score applications. Each application is scored by one individual from each Service. The Navy specialty committees composed of Navy GME program directors and Medical Corps specialty leaders recommend the selection of Navy applicants.

d. Scoring. Points are awarded for preclinical and clinical medical school academic achievement, internship, and residency performance, operational and utilization tour performance, and the potential for a successful practice as a medical specialist and career naval officer. Three scores are combined to create a composite score and bonus points are awarded for research and for military service completed before entering medical school. The final scores are used to generate order of merit lists by specialty for the Services to use for selection and placement.

e. Nonclinical Training. A Navy committee chaired by the Assistant Chief, Medical Corps will consider applications from Medical Corps members for other formal nonclinical postgraduate education such as the Joint Commission on Accreditation of Healthcare Organization Fellowship and similar programs. A personal statement is mandatory for these applicants.

f. Selection and Placement. The Navy specialty committees make recommendations for selection to specific programs, but the Navy GMESB retains final authority for designating each Navy applicant as either a primary select, alternate, or nonselect. The results of the Navy GMESB are reviewed and approved by the Chief, BUMED and COMNAVPERSCOM before release. Applicants requesting FTOS training may be considered for OFI programs if these programs meet the needs of the Navy. Applicants designated as alternates for FTIS programs may also be considered for OFI programs.

5. Program Availability. BUMED projections of Navy Medical Corps future manpower requirements govern GME program and position availability. Enclosure (1) lists projected inservice FTIS residency and fellowship selection goals. Projections regarding the availability of FTOS, OFI, and NADDS training are in enclosure (2). Deferments are available to Reserve officers on active duty with remaining obligated service or who are willing to assume an obligation, per reference (b), and to Health Professions Scholarship Program (HPSP) graduates for specified NADDS specialties. The precept for the 2003 GMESB will contain the official delineation of GMESB selection goals.

a. Applications for continuation of deferment for additional training from current 1-year delay participants are generally not approved. A limited number of continued deferments may be available for applicants currently in this program, but only in critically undermanned specialties, designated by BUMED, for which there is no FTIS program or the number of FTIS, FTOS, and OFI positions is insufficient to meet projected manning requirements.

b. There will be no preselection for FTIS programs unless specifically authorized by BUMED. Certain civilian and OFI GME fellowships and a limited number of residency programs require a 12- to 24-month lead-time for applicants to interview and compete in national matching programs. Applicants for these programs may apply for FTOS, OFI, or NADDS programs beginning in AY 2005/06.

c. Applicants to the residency in aerospace medicine are subject to aeromedical standards and anthropometric compatibility criteria for duty involving flying as flight surgeons, and remain so throughout training and assignment as aerospace medicine specialists. All applicants must submit a current NAVMED 6410/2 Clearance Notice (Aeromedical) with their GME application. Those applicants who are not already designated flight surgeons can expect flight surgeon training in addition to, or incorporated into, their training as aerospace medicine residents, and are thus subject to aeromedical standards and anthropometric compatibility criteria for duty involving actual control of aircraft as student flight surgeons, and remain so until they are designated as flight surgeons. Such applicants must undergo a complete aviation medical examination and anthropometric evaluation, and submit results to the Naval Aerospace Medical Institute and to the Naval Aviation Schools Command, respectively, following the procedures

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specified in the annual BUMEDNOTE 1520, Guidance for Student Flight Surgeon and Student Undersea Medical Officer Training Applications. However, they are not required to submit a separate application for flight surgeon training.

d. Applicants preselected for a GME program by a previous GMESB will be required to decline that preselection if they apply for a different program at the 2003 GMESB.

e. General information about Navy GME programs and specific program information by site is included on the Navy GME Web site. Detailed information regarding GME programs can be obtained from individual program directors or specialty leaders. Telephone numbers and e-mail addresses are available from the NMETC Navy GME Program Office or by accessing the Web sites in paragraph 16.

6. Application Submission. Navy applicants should access the Web site at: www-nshs.med.navy.mil/gmeapplication/default.asp by 15 September 2003 to complete and submit the 2003 GME application. This site will be accessible 1 July 2003 and requires Netscape or Internet Explorer 3.0 or better. Applicants can find answers to their questions in the guidance on the Web site. Applicants must submit all required hard copy supporting documents listed in paragraph 7a to arrive at NMETC, Bethesda by 15 September 2003.

a. Hard Copy Applications

(1) Applicants who are unable to access the above Web site to submit their applications electronically must submit paper copies of their applications (enclosures (3) and (4)) with all supporting documents. Those who submit electronically should not submit a hard copy application. If a hard copy is received in addition to an electronic version, data contained in the electronic version will take precedence over information submitted on the paper copy. See paragraph 9b regarding modifications to applications.

(2) Duplication of data requested on the hard copy version of the DOD application and the Navy supplement is necessary to accommodate the entry of data in both the Joint Service applicant database and the Navy GMESB database. This will be transparent to users of the Web version.

b. Forwarding Applications. Commanding officers will formally endorse applications (see paragraph 15b) and forward the endorsements in a timely manner. Applicants should print a copy of their electronic applications for submission through their chain of command, and the command should retain the hard copy application when the endorsement is forwarded to NMETC. Teaching hospitals should not hold the endorsements or supporting documents for bulk mailing immediately before the deadline. This causes unacceptable application processing backlogs and does not allow the Navy GME Program Office sufficient time to notify applicants to forward missing documents.

c. Current Contact Data. The applicant is responsible for advising the Navy GME Program Office (Code OG11) of any changes to command or home addresses, telephone numbers, or e-mail addresses after an application has been submitted.

d. Application Copies. Each applicant and his or her command should retain a copy (printed from the Web submission) of the completed GME application and all supporting documents they submit. Letters of recommendation are considered confidential, and medical school deans' letters are normally accompanied by a signed waiver of the individual's right to see them. The Navy GME Program Office will not provide copies of these documents to applicants or third parties, including civilian or military GME officials. Recommendations received directly from reporting seniors, medical schools, and individuals are considered confidential and will not be provided to applicants.

e. Specialties and Programs Requested

(1) Applications will be considered only for the FTIS programs in enclosure (1) and for specialty and subspecialty areas in enclosure (2). Applications for specialties or programs for which no selection goal has been established will not be reviewed by the GMESB. Applicants will not be considered for more than two clinical specialties.

(2) Although all DOD GME training sites are listed in block 23 of the DOD application, each Service will consider its requirements in selection and placement decisions. Navy applicants will be needed to fill Navy requirements. Filling available Navy inservice training positions will take precedence over selections that would fill positions in other service programs.

7. Application Content

a. Each GME application must include the following supporting documents:

(1) Current curriculum vitae in the format shown in enclosure (5) and available at the Web application site.

(2) Copy of medical licensing examination scores, (USMLE, COMLEX, FLEX, NBME, or NBOME, Steps or Levels 1, 2, and 3).

(3) If the applicant possesses a current unrestricted medical license, a copy of license including the expiration date is required.

(4) Medical school dean's letter.

(5) Complete graduate level medical school transcripts with date MD or DO was conferred.

(6) A letter of recommendation or a Navy Internship End of Training Evaluation (IETE) form from the applicant's GME-1 program director, if applying for residency training. A Program Director Recommendation Form (PDRF) or a letter of recommendation from the GME-2+ program director if applying for fellowship training. For those who have applied to prior GMESBs while in internship or residency, previous letters of recommendation reflecting only partial completion of GME-1 or GME-2+ training are not acceptable (see paragraph 15c).

(7) Commanding officer's endorsement (see paragraph 15b).

(8) In addition to the commanding officer's endorsement, up to two additional letters of recommendation.

(9) Copies of applicant's five most recent fitness reports. Individuals with insufficient active duty to have received five fitness reports should include a statement to that effect in the personal statement and forward all available reports.

(10) Applicants for nonclinical postgraduate education must submit a personal statement describing their background and qualifications, specific motivation for the training, and how the training will benefit the Navy.

b. Forward all supporting documents to:

Naval Medical Education and Training Command
ATTN: Navy GME Program Office (Code OG11)
Building 1, Tower 15, Room 15145
8901 Wisconsin Avenue
Bethesda, MD 20889-5611

c. Complete, Current Supporting Documents. Applicants are responsible for ensuring final medical school transcripts and deans' letters are on file at the Navy GME Program Office or included with their applications. These documents will normally be on file at the Navy GME Program Office only if the applicant submitted a complete application for residency or fellowship training within the past 5 years. Medical school transcripts and deans' letters previously provided when initially applying for GME-1 (internship) are often incomplete. Therefore, applicants must provide a copy of their graduate level transcripts showing MD or DO date of conferral. Current interns must submit final copies of these documents with their 2003 GMESB applications and must request copies of medical school transcripts and deans' letters directly from their medical schools. Upon submission of an application to the NMETC GME Program Office, an immediate response via e-mail will be sent advising the applicant of the contents of his or her training file (i. e., Dean's letter, transcripts, board scores, etc.) and of what documents are needed to complete the application process. This should eliminate any unnecessary telephone calls during a time of very heavy workload in the GME Program Office. If there are any record or document discrepancies, the NMETC GME Program Office will contact the applicant.

8. Applicant Communication with Program. Applicants are required to initiate a personal contact with the program director of their desired program(s). If a personal interview is not possible before the GMESB due to deployment or other factors, a telephone interview should be arranged. If neither type of interview is possible, the applicant should send written correspondence or an e-mail message stating the intent to apply for and interest in the program. Applicants for subspecialties are strongly encouraged to communicate with the appropriate specialty leader in addition to the program director. These contacts are essential to ensure two-way communication about specific program and applicant expectations. A lack of direct contact will severely degrade the strength of the application.

9. Application Deadline. All deadlines are firm. The application must be submitted electronically by the close of business on 15 September 2003, after which the application Web site will be disabled. All content in paragraph 7 should also arrive at NMETC by that date. If it is absolutely necessary to forward any supporting documents separately, the Navy GME Program Office must receive them by 17 October 2003. Documents received after this date may not be filed with the application and may not be available for review by the specialty committee members.

a. Applications received after 15 September 2003 will not be processed for consideration by the 2003 GMESB, except as authorized by the NMETC Director for GME.

b. Any modification (i.e., change in training location, type, program, specialty, application withdrawal, etc.) to an application must be received in writing in the Navy GME Program Office by 17 October 2003. Use e-mail, if possible.

10. Civilian and Inactive Reserve Medical Officer Applicants. Civilian physicians and inactive or drilling Reserve medical officer applicants for Navy GME training must meet all requirements for initial appointment or recall to active duty in the Medical Corps of the United States Naval Reserve. If selected for Navy-sponsored GME, these applicants must apply for and accept initial appointment or recall before active duty orders will be written. Civilian physicians and inactive or drilling Reserve medical officer applicants must submit a complete application with a request for either initial appointment or recall to active duty through the nearest Navy recruiting official to the Commander, Navy Recruiting Command (NAVCRUITCOM), 5722 Integrity Drive, Millington, TN 38054-5057. The NAVCRUITCOM Medical Programs Officer may be contacted at (901) 874-9242. When NAVCRUITCOM determines a civilian or recall applicant is eligible for appointment, the GME application with supporting documents and appropriate recruiting forms will be forwarded to the Navy GME Program Office for consideration at the GMESB. Applications received by the Navy GME Program Office directly from a civilian physician or inactive or drilling Reserve medical officer will be forwarded to NAVCRUITCOM for initial processing. Although former HPSP graduates who are currently NADDS and 1-year delays are inactive Reserve officers, they do not need to apply for recall because their recall is automatic upon completion of GME. Given the scoring guidance outlined in paragraph 4d, current active duty medical officers have a distinct advantage. It is unlikely a civilian or reservist will be selected if the number of qualified active duty applicants exceeds the number of positions available.

11. Application Processing. Applicants may check the status of their applications and supporting documents via the Web site noted in paragraph 6. Incomplete applications will be forwarded to specialty committees for consideration, but may result in diminished GME selection opportunity. NAVPERSCOM reviews the service records of all applicants before the GMESB convenes to determine GME assignment compatibility and ensures applicants meet all requirements for promotion and transfer (including compliance with physical readiness and body fat standards and completion of any Navy or DOD tour-length requirements). It is NAVPERSCOM's Navy-wide policy that officers who have failed to select for promotion to the next higher grade cannot be made available for assignment to full-time duty under instruction, including GME. The GMESB

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will consider only those applicants whose projected rotation date is compatible with assignment to training in the AY in which GME training is requested and who are designated by NAVPERSCOM as available for training.

12. Selection Notification. Selection results for the 2003 GMESB will be announced by Naval Message and released on or about 17 December 2003. The Naval Message will publish the names of all Navy GME, FS, and UM applicants designated as either a primary selectee or alternate and will be available on the NMETC GME Office Web site (see paragraph 16a). This will be the only notification for active duty applicants at Navy activities. If a civilian physician or an inactive or drilling Reserve recall applicant is selected, NAVCRUITCOM and the applicant will be notified by letter from the Navy GME Program Office.

13. Alternates. Applicants designated as alternates are placed in a pool maintained by the Navy GME Program Office and used on a case-by-case basis to fill vacancies caused by primary selectee declinations or to fill training requirements to meet the needs of the Navy. If a primary selectee cannot attend training, an alternate is identified by the Navy GME Program Office. NAVPERSCOM-4415 will determine the designated alternate's assignability, authorize his or her release for reassignment to training, and notify the Navy GME Program Office before a training position can be offered to an alternate.

14. Applicant Decision to Accept or Decline Training. Applicants selected for GME must ensure the Navy GME Office is notified by 12 January 2004 of their decision to accept or decline the training for which they have been selected. Applicants selected for FS must notify BUMED (M3F8) at (202) 762-3457 by 12 January 2004 of their decision to accept or decline FS training for which they have been selected. Those selected for UM must notify BUMED (M3F7) at (202) 762-3449 by 12 January 2004 of their decision to accept or decline the Undersea or Diving Medicine training for which they have been selected.

a. The Naval Message announcing the results of the 2003 GMESB will contain specific procedures for selectee responses. Individuals selected for more than one training program (GME, FS, or UM) may accept only one program. Acceptance of either the FS or UM program will normally result in forfeiture of designation as an alternate for a GME program. Failure to notify the Navy GME Program Office by the required deadline may result in the loss of the training opportunity.

b. FTIS and OFI selectees with less than 1 year of obligated service remaining at the time they would commence training will execute a 2-year extension of active duty by accepting their GME positions. This extension will be applied concurrently with the obligation for training and will not add to trainee's total obligation. Enclosure (6) provides guidance on GME obligation.

15. Application Guidance. Selection for GME training is competitive. The following information is provided to assist in improving GME selection opportunity:

a. Document Content. Each applicant should ensure all achievement, both academic and professional (board scores, internship, previous residency, and postinternship), is documented in the GME application. Most information in GME training files is provided by the applicant in

current or previous applications. These files, which are reviewed with the application, may also contain previous NAVPERSCOM orders and GME-related correspondence originated by BUMED, the Navy GME Program Office, or local GME offices. In most cases, two of the three individuals scoring an application will have no personal knowledge of the applicant so the majority of the score will be based on information in the application.

b. Command Endorsement. The endorsement by the applicant's commanding officer should comment on the applicant's performance of duty, professional aptitude and potential as a career medical specialist. If the applicant's commanding officer is not a Medical Corps officer, at least one letter of recommendation must be from a senior physician in their current chain of command (i.e., squadron medical officer, regimental, or division surgeon, etc.).

c. PDRF's, Letters of Recommendation, and IETEs. These forms and letters reflect professional accomplishments and provide program directors, specialty committee members, and Joint Service Selection Panel members with vital information related to an applicant's performance as a physician and a naval officer. If necessary, current recommendations should be submitted from program directors to afford the applicant and committee members the benefit of the most complete evaluation reflecting performance during the entire period of training (see paragraph 7a(6)). All applicants who completed Navy internships at Navy teaching hospitals in 1996 or later must include an IETE form as a supporting document to their GME application. This document will fulfill the GME-1 letter requirement in paragraph 7a(6) and is available from the GME office at Navy training sites. Applicants who completed Navy residencies at Navy teaching hospitals may have program directors complete a PDRF or submit their letter of recommendation as a supporting document to their GME application. The IETE and PDRF forms are on the GME Program Office Web site. Two letters of recommendation other than the program director's letter(s) and command endorsement are optional and may be included at the applicant's discretion. No more than two letters of recommendation will be filed with the current application. Unless requested, the first two letters received will be the ones filed in the application.

d. Training Site Requests. Applicants for training which is offered at multiple Navy sites may express preferences, but will be considered for all sites. Potential cross-country moves are closely monitored. An applicant's refusal to consider training at one or more sites may be considered a negative factor in evaluating the applicant's potential for successful practice as a specialist and career officer unless certified for an exemption from this requirement by the specialty leader.

e. FTOS, OFI, NADDS Requests. 2003 HPSP graduates and Navy applicants desiring deferment, continued deferment, extension of current program length, or Navy sponsorship in FTOS and OFI must first apply to the GMESB. Applicants may have preliminary discussions, but are not authorized to commit to a civilian or OFI program director, or otherwise pursue formal acceptance into a civilian or OFI program until designated a primary FTOS or OFI selectee by the GMESB. Active duty medical officers cannot accept an offer to train in a civilian program without prior formal Navy authorization and will not be issued orders by NAVPERSCOM without the prior approval of the NMETC Director for GME. Applicants requesting assignment

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to training programs at the USUHS or an Army or Air Force activity will be considered by a Joint Service Selection Panel, and if selected, the site will be designated. Applicants for other OFI programs (National Institutes of Health or Armed Forces Institute of Pathology) must first be selected by the Navy GMESB and then approved by the institution before a specific program location can be confirmed.

f. Special Pay and Obligated Service. Reference (c) contains policy governing special pays for Medical Corps officers. Paragraph 9a(1) of reference (c) is germane to Medical Corps officers beginning initial residency (GME-2+) training. Reference (d) addresses obligated service for GME training and enclosure (6) provides basic information about obligated service obligation for each type of GME. For additional information, e-mail Ms. Charlotte Moore at: cmoore@nmetc.med.navy.mil or call (301) 319-4118 or DSN 285-4118. For questions regarding Special Pay, contact LCDR D. W. Heilman (Medical Department Special Pays Program Manager) at: dwheilman@us.med.navy.mil or call (202) 762-3357 or DSN 762-3357.

16. Additional Information. If you have questions after thoroughly reading this notice:

- a. Access the GME Office Web site at: www-nshs.med.navy.mil/gme/mcpp.htm.
- b. Send an e-mail message to the Navy GME Applications and Placement Manager, Mr. Joe Pelot at: jhpelot@nmetc.med.navy.mil or call (301) 319-4514 or DSN 285-4514.
- c. Access this Web site for links to hospital-specific sites: navymedicine.med.navy.mil/worldwide_navy_medfac.asp.

17. Forms

a. NAVMED 1520/12 (Rev. 6-2003), Navy Supplement to DOD Application for Graduate Medical Education (Residency/Fellowship) 2004 Graduate Medical Education Selection Board for Academic Year 2005 and Demographic Information Request is available at enclosure (4) and on the BUMED Web site at: <http://navymedicine.med.navy.mil/instructions/default.asp?type=F>.

b. NAVMED 6410/2 (Rev. 5-90), Clearance Notice (Aeromedical) is available on the BUMED Web site at: <http://navymedicine.med.navy.mil/instructions/default.asp?type=F>.

18. This notice may be reproduced locally and should be provided in its entirety to individuals requesting GME applications.



K. L. MARTIN
Vice Chief

Available at: <http://navymedicine.med.navy.mil/instructions/directives/default.asp>

**2003 GMESB PROJECTED GME-2+ FULL-TIME INSERVICE (FTIS) SELECTION GOALS
FOR ACADEMIC YEAR 2004
(Resintern Selections Removed from Totals)**

RESIDENCY PROGRAMS

Program	Length	Bethesda MD	Portsmouth VA	San Diego CA	Total
Aerospace Medicine	2 Yrs	Naval Aerospace Medical Institute, Pensacola FL			06
Anesthesiology	3 Yrs	06	06	06	18
Dermatology	3 Yrs	02		03	05
Emergency Medicine	3 Yrs		07	07	14
Family Practice	2 Yrs	Bremerton, WA Camp Lejeune, NC Camp Pendleton, CA Jacksonville, FL Pensacola, FL			37
Internal Medicine	2 Yrs	7	9	9	25
Neurology	3 Yrs	02			02
Neurosurgery	6 Yrs	01			01
Obstetrics and Gynecology	3 Yrs	03	03	04	10
Ophthalmology	3 Yrs			03	03
Orthopedic Surgery	4 Yrs	02	02	04	08
Otolaryngology	4-5Yrs	1-2	1-2	1-2	05
Pathology	4 Yrs	2-3		2-3	05
Pediatrics	2 Yrs	04	06	07	17
Psychiatry	3 Yrs	02	03	03	08
Radiology	4 Yrs	05	05	07	17
Surgery - General	4 Yrs	03	02	05	10
Urology	5 Yrs			01	01

FELLOWSHIP PROGRAMS

Program	Length	Bethesda MD	Portsmouth VA	San Diego CA	Total
Anesthesia-Pain Management	1 Yr		01		01
IM - Cardiology	3 Yrs	02		02	04
IM - Endocrinology	2 Yrs	00			00
IM - Gastroenterology	3 Yrs	02		02	04
IM - Hematology/Oncology	3 Yrs	01			01
IM - Infectious Disease	2 Yrs	02		02	04
IM - Pulmonary Med/Crit Care	3 Yrs	02		02	04
Radiology - Imaging	1 Yr	01		01	02
Family Practice Sports Medicine	1 Yr	NH Camp Pendleton			02

**2003 GMESB PROJECTED FULL-TIME OUTSERVICE (FTOS) AND
OTHER FEDERAL INSTITUTION (OFI) SELECTION AND PRESELECTION GOALS**

RESIDENCIES	AY2004	AY2005	AY2006
Occupational Medicine	2	0	0
Preventive Medicine	2	0	0
Surgery: Plastic and Reconstructive	1	1	1
Urology	4	0	0

FELLOWSHIPS	AY2004	AY2005	AY2006
Anesthesiology Subspecialties (Critical Care, Cardiac, Obstetrics)	2	2	0
Cardiology General	0	0	0
Cardiology Subspecialties	1	1	0
Dermatology Subspecialties (Dermatopath, Mohs)	0	0	0
Emergency Medicine Subspecialties (Toxicology, EMS, Pediatrics)	1	0	0
Family Practice Subspecialties (Sports Medicine, Geriatrics, Obstetrics)	2	0	0
Internal Medicine Subspecialties	4	1	0
Neurology Subspecialties (Neurophys, Sleep, Neuro-Ophth, Movement)	0	0	0
Neurosurgery Subspecialties (Neurovascular, Spine, Skull Base)	0	0	0
Nonclinical Postgraduate Education (JCAHO, MPH Population Health)	0	0	0
Nuclear Medicine	0	0	0
Obstetrics/Gynecology Subspecialties (Urogyn, Gyn Onc, Maternal-Fetal Med.)	0	2	0
Ophthalmology Subspecialties (Glaucoma, NeuroOph, Ocular, Pathology)	1	1	0
Orthopedic Subspecialties (Joint Reconstructive, Foot & Ankle, Hand)	1	2	2
Otolaryngology Subspecialties (Head & Neck, Neuro-Oto, Pediatric)	0	1	0
Pathology Subspecialties (Forensic, Transfusion)	2	0	0
Pediatric Subspecialties (G-I, Dev Peds, Neonatal, Pulmonary, Neurology)	4	1	0
Psychiatry Subspecialties	0	0	0
Radiology Subspecialties (Imaging, Interventional, Neuro, Peds, Musculoskeletal)	2	1	1
Surgery Subspecialties (Trauma/CC, Surgical Oncology, Lap/Endo)	3	2	2
Surgery - Cardiothoracic & Vascular	0	2	2
Surgery - Plastic & Reconstructive	0	0	0
Urology Subspecialties (Oncology, Pediatric)	0	2	0

Requests for deferred training (NADDS) will be considered in all specialties and subspecialties. Applicants are encouraged to consider listing deferred training as an option if the applicant is willing to be released from active duty to complete specialty/subspecialty training before returning to complete obligated service. Willingness to accept deferred training will increase an applicant's likelihood of selection.

Those fellowship subspecialties enclosed in parenthesis have been identified as the community's greatest need. Applications for these listed subspecialties will have a greater likelihood of selection.

DEPARTMENT OF DEFENSE APPLICATION FOR GRADUATE MEDICAL EDUCATION

THIS FORM IS AFFECTED BY THE PRIVACY ACT OF 1974

1. AUTHORITY: 10 USC 3012.
2. PRINCIPAL PURPOSE(S): To compile information necessary to evaluate an application for military graduate medical education (GME) training.
3. ROUTINE USES: To evaluate application for professional training in military and civilian facilities (**Medical Corps officers only**).
4. MANDATORY OR VOLUNTARY DISCLOSURE: Disclosure of requested information is voluntary, however, without it, consideration for GME cannot be accomplished and GME may not be assured.

1. NAME (Last, First, MI)	2. GRADE	3. SSN	4. CURRENT SPECIALTY	5. SERVICE
				<input type="checkbox"/> Air Force
				<input type="checkbox"/> Army
				<input type="checkbox"/> Navy
6. HOME ADDRESS (ZIP+4)	7. HOME PHONE	8. COMPLETE DUTY ADDRESS	9. DUTY PHONE	
	(with Area Code)		CML:	
			DSN:	
			PGR:	
			FAX:	

10. E-MAIL:

11. CURRENT STATUS	12. SPECIALTY OR SUBSPECIALTY REQUESTED	
<input type="checkbox"/> MEDICAL STUDENT (<input type="checkbox"/> HPSP <input type="checkbox"/> USUHS <input type="checkbox"/> ROTC)	Choice:	
<input type="checkbox"/> ACTIVE DUTY PGY1 (INTERN)		
<input type="checkbox"/> ACTIVE DUTY RESIDENT		
<input type="checkbox"/> ACTIVE DUTY FELLOW		
<input type="checkbox"/> ACTIVE DUTY FIELD/OPERATIONAL/STAFF	13. START DATE REQUESTED	14. PROGRAM LENGTH
<input type="checkbox"/> DEFERRED/REDEF/FAP (Until _____ Month/Year)		
<input type="checkbox"/> OTHER (Specify)		

15. TRAINING

a. Undergraduate School		COMPLETION OR GRAD YEAR
Major		
Approximate GPA	Honors	
b. Medical School Name		COMPLETION OR GRAD YEAR
Approximate GPA	Class Ranking _____ of _____ School Does Not Rank	
Academic Honors		
c. PGY1/Specialty	Location	COMPL OR GRAD YEAR
d. Residency/Specialty	Location	COMPL OR GRAD YEAR
e. Fellowship/Specialty	Location	COMPL OR GRAD YEAR

16. LIST OF PGY1 ROTATIONS AND TIME SPENT IN EACH: (Fill out only if you are applying for a residency and did not complete a categorical PGY1 in that specialty. Not to be completed if applying for a fellowship.)

17. SPECIALTY BOARD CERTIFICATION ☐ YES ☐ NO If yes, indicate specialty:**18. MEDICAL LICENSING EXAMINATIONS (Copy of Steps/Levels 1-3 must be submitted with this application)**

	Check One	Circle One		
Step/Level 1	<input type="checkbox"/> Passed <input type="checkbox"/> Failed Year taken _____ <input type="checkbox"/> Not Taken	FLEX	NBME/USMLE	NBOME/COMLEX
Step/Level 2	<input type="checkbox"/> Passed <input type="checkbox"/> Failed Year taken _____ <input type="checkbox"/> Not Taken			
Step/Level 3	<input type="checkbox"/> Passed <input type="checkbox"/> Failed Year taken _____ <input type="checkbox"/> Not Taken			

19. ECFMG (If applicable) Certificate #

Date

Validated/Approved by JSGMESB Committee May 2003

Enclosure (3)

NAME (Last, First, MI)		SSN	
20. POST-PGY1 EXPERIENCE (Last three (3) assignments)			
Duty Station	Duty Title	Dates	
21. Participation in Federally Funded Programs (check all that apply): <input type="checkbox"/> HPSP <input type="checkbox"/> ROTC <input type="checkbox"/> USUHS <input type="checkbox"/> FAP <input type="checkbox"/> Military Academy <input type="checkbox"/> Direct Accession			
22. I possess a current, valid and unrestricted medical license <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, you must submit a copy of license including the expiration date with this application.)			
23. TRAINING PREFERENCES			
Rank order 1, 2, 3, etc.			
AIR FORCE		ARMY	
David Grant Medical Center, Travis AFB, CA		Eisenhower Army Medical Center, Fort Gordon, GA	
Eglin Regional Hospital, Eglin AFB, FL		Madigan Army Medical Center, Tacoma, WA	
Ehrling Bergquist Hospital, Offutt AFB/University of Nebraska, NE		NCC-Walter Reed Army Medical Center, Washington, DC/	
Keesler Medical Center, Keesler AFB, MS		Dewitt Army Community Hospital, Fort Belvoir, VA/	
NCC-Malcolm Grow Medical Center, Andrews AFB, MD/National Naval Medical Center, Bethesda, MD/Walter Reed Army Medical Center, Washington, DC/		National Naval Medical Center, Bethesda, MD/	
Dewitt Army Community Hospital, Fort Belvoir, VA/USUHS		Malcolm Grow Medical Center, Andrews AFB, MD/USUHS	
SAUSHEC-Wilford Hall Medical Center, Lackland AFB, TX/Brooke Army Medical Center, Fort Sam Houston, TX/University of Texas, San Antonio, TX		SAUSHEC-Brooke Army Medical Center, Fort Sam Houston, TX/Wilford Hall Medical Center, Lackland AFB, TX /	
Scott Medical Center, Scott AFB/St. Louis University, IL		University of Texas, San Antonio, TX	
Wright-Patterson Medical Center, Wright Patterson AFB/Wright State Univ, OH		Tripler Army Medical Center, Honolulu, HI	
USAFSAM, (RAM/HYPERBARIC ONLY) Brooks AFB, TX		William Beaumont Army Medical Center, El Paso, TX	
Civilian Sponsored		Womack Army Medical Center, Fort Bragg, NC	
Civilian Deferred/Redeferred (Nonfunded)		Darnall Army Community Hospital, Fort Hood, TX	
NAVY		Martin Army Community Hospital, Fort Benning, GA	
Navy Medical Center, Portsmouth, VA		Keller Army Community Hospital, West Point, NY	
Naval Medical Center, San Diego, CA		Civilian Sponsored	
Naval Hospital, Bremerton, WA		Civilian Deferred (NGMEP)	
Naval Hospital, Camp Lejeune, NC		OTHER	
Naval Hospital, Camp Pendleton, CA		Uniformed Services University of the Health Sciences (Non-Clinical)	
Naval Hospital, Jacksonville, FL		Armed Forces Institute of Pathology	
Naval Hospital, Pensacola, FL		Walter Reed Army Institute of Research	
Naval Aerospace Medical Institute, Pensacola, FL		Other Federal (indicate Institution)	
NCC-National Naval Medical Center, Bethesda, MD/Walter Reed Army Medical Center, Washington, DC/ Dewitt Army Community Hospital, Fort Belvoir, VA			
Malcolm Grow Medical Center, Andrews AFB, MD/USUHS			
Civilian Navy Sponsored (FTOS)			
Civilian Deferred (NADDS)			
24. I understand that the GME training received is directed toward board certification. I am familiar with the training requirements for board certification in the specialty for which I have applied. It is understood that I must enter a program that is accredited and listed in good standing in the most current Graduate Medical Education Directory published by the American Medical Association or if applicable (generally PGY1 level of GME) by the most current Yearbook and Directory published by the American Osteopathic Association. I understand that I must also meet the requirements to sit for the certification examination by the respective specialty board which is recognized by the American Board of Medical Specialties. For those subspecialties, which do not lead to board certification nor accreditation status, training must be received in a program approved by the appropriate specialty society. I understand that my service obligation following schooling will be computed in accordance with applicable Service regulation and DOD Directives and that I will be made aware of my exact obligation prior to entering GME training. I acknowledge that I understand the contents of this application and I affirm that the information given in this application is true and complete to the best of my knowledge. I am aware that I must submit all supporting documents required by the military Service for which I am assigned for this application to be complete.			
APPLICANT SIGNATURE :		DATE:	

Validated/Approved by JSGMESB Committee May 2003

18 Jun 2003

APPLICATION DATE (MM/DD/YY): ____/____/____

NAVY SUPPLEMENT TO DOD APPLICATION FOR GRADUATE MEDICAL EDUCATION (RESIDENCY/FELLOWSHIP) 2003 GRADUATE MEDICAL EDUCATION SELECTION BOARD FOR ACADEMIC YEAR 2004
--

NAME _____
 LAST FIRST MI GRADE SSN

STATUS 1 2 3 4 5 6 7
 (Circle) USN USNR USNR-R USA USAF PHS CIV OTHER: _____
 (Active) (Inactive) (Specify)

SPECIALTY/SUBSPECIALTY REQUESTED: _____ EAOS: _____

TYPE OF TRAINING AND TRAINING START DATE REQUESTED: (Check as appropriate)

_____ Residency/Fellowship Training for AY 2004: ____/____
 AND/OR YY MM
 _____ Preselection for Residency/Fellowship Training
 in **FTOS/OFI** or **Deferment** Programs in AY 2005/2006: ____/____
 YY MM

My previous training: (Check) _____ PGY-1/R-1 (Internship) _____ PGY-2+ (Residency)
 Qualifies me to begin: (Check) _____ Residency (R) _____ Fellowship (F)
 Training at Year level: (Check) _____ R1 (My internship does not qualify
 me to begin residency at R-2 level)
 _____ R2
 _____ F1
 _____ Other: _____

NMETC USE ONLY:

CURRENT TRAINING STATUS: 1-Student 2-Intern 3-Intern with Prior Service
 (Circle one) 4-Resident 5-Fellow 6-Not in training

CURRENT ASSIGNMENT: (Circle one)

- | | |
|------------------------------------|--|
| 1. GMO - USMC | 9. Trainee - BUMED Activity |
| 2. GMO - Surface | 10. a. Trainee - OFI |
| 3. GMO - BUMED Activity | b. Trainee - FTOS |
| 4. Flight Surgeon - Operational | 11. a. Trainee - 1-Year Delay (USNR-R) |
| 5. Flight Surgeon - USMC | b. Trainee - NADDS (USNR-R) |
| 6. Flight Surgeon - BUMED Activity | 12. Civilian |
| 7. Undersea - Operational | 13. Staff Specialist - Operational |
| 8. Undersea - BUMED Activity | 14. Staff Specialist - BUMED Activity |

TYPE OF DEGREE: MD _____ DO _____ DEGREE DATE: (YY/MM) ____/____

If completed or currently an intern, Program Director's name _____

If completed or currently a resident, Program Director's name _____

If completed or currently a fellow, Program Director's name _____

18 Jun 2003

**NAVY SUPPLEMENT TO DOD APPLICATION FOR GRADUATE MEDICAL EDUCATION (RESIDENCY/FELLOWSHIP)
2003 GRADUATE MEDICAL EDUCATION SELECTION BOARD FOR ACADEMIC YEAR 2004**

OPTIONAL PERSONAL STATEMENT: (Mandatory for Nonclinical applicants)

This section may be used to amplify information provided on pages 1 and 2 of the application or to address any personal and/or professional issues which the applicant believes may be of value to the 2003 GMESB.

Privacy Act Statement. The authority to request the information in this supplement is contained in 5 U.S.C. 301 and 10 U.S.C 5031. The principal purpose for which this information is used is to assist officials and employees of the Department of the Navy in determining your eligibility and evaluating your request for GME. Other routine uses of this information are to determine course and training demands, requirements, and achievements; analyze student groups or courses, provide academic and performance reports, and for other training, administration, and planning purposes. Disclosure of this information is voluntary; however, failure to disclose requested information may result in nonselection for training.

Applicant Acknowledgment:

I have read and understand the instructions for the completion of this application. I certify the information submitted on these application materials is complete and correct to the best of my knowledge. I am aware it is my responsibility to arrange to submit any supplementary material (i.e., transcripts, letters of evaluation, etc.) required.

I am aware of the requirement to contact the program director/specialty leader of the specialty to which I am applying prior to the GME Selection Board either by personal/telephone interview, e-mail, or written letter.

I understand if selected for training, my service obligation will be computed following DOD Instruction 6000.13. I understand and agree that following training, any tender of resignation or request for release from active duty on my part will be disapproved until the total period of obligated active service is completed, except for the convenience of the Government or in the case of individual determined humanitarian circumstances.

Signature of Applicant: _____

Date: _____

18 Jun 2003

DEMOGRAPHIC INFORMATION REQUEST

Please circle the applicable responses:

U.S. CITIZEN: Y/N

DATE OF BIRTH: _____ AGE: _____
MM/DD/YY

SEX: M/F

RACE/ETHNIC GROUP

- 1 = African-American (not of Hispanic origin)
- 2 = American Indian or Alaskan Native
- 3 = Asian American or Pacific Islander
- 4 = Hispanic
- 5 = Caucasian (not of Hispanic origin)
- 6 = Other

PRIVACY ACT STATEMENT

This information is requested under authority contained in 5 U.S.C. 301 and related departmental regulations. The principal purpose for obtaining this information is to permit a demographic characterization of all applicants applying for naval Medical Department education and training. The information will be used to provide a base from which to assess affirmative action initiatives and equal opportunity programs within the naval Medical Department. Disclosure of this information is voluntary. Failure to disclose the requested information will not result in adverse consequences.

Printed Name

Date

Signature

18 Jun 2003

CURRICULUM VITAE FORMAT FOR DOD GME APPLICATION

MM/DD/YYYY

PERSONAL DATA

Full Name: Grade/Corps/Service: SSN:
Current Home Address:
Home Telephone:
Duty Assignment Address:
Duty Assignment Telephone: DSN: Commercial:
Pager Number: E-mail:
Birth Date/City/State/Country of Birth:

Spouse: (Complete only if your spouse is active duty)

Full Name: Grade/Corps/Service: SSN:
Duty Assignment: Other:

EDUCATION (Degree/School/Graduation Date for Each)

Undergraduate:
Medical School:
Other Postgraduate Degrees:
Military Training Courses:
Other Military Courses:

PROFESSIONAL TRAINING AND EXPERIENCE (Specialty/Location/Completion Date for Each)

PGY-1:
Residency:
Fellowship:

PRIOR MILITARY SERVICE (Do not complete this section unless you have had prior service before beginning medical school – chronological order starting with latest Service)

Type of Service:
Rank:
Corps (commissioned Service only):
Description of Service (describe the type of duties performed):
Dates of Service: To

WORK HISTORY/MILITARY ASSIGNMENT HISTORY (Chronological order starting with current assignment)

Duty Title:
Duty Location:
Dates of Assignment:

18 Jun 2003

LICENSURE AND SPECIALTY CERTIFICATION

Current Unrestricted State License (License Number/State/Expiration Date):

Board Certification (Specialty/Certification Date):

If Board Certification Is Pending, Indicate Status:

HONORS AND RECOGNITION:

Undergraduate:

Medical:

Military:

ACADEMIC APPOINTMENTS:

PROFESSIONAL SOCIETIES:

PUBLICATIONS/RESEARCH (Must indicate in what capacity completed, i.e., medical student, intern/resident, house staff officer, or field staff officer.)

18 Jun 2003

SUMMARY OF ACTIVE DUTY OBLIGATION (ADO) FOR GME

(Based on Reference (d))

1. **In a Military Facility (FTIS/OFI)**. A member shall incur an ADO of ½ year for each ½ year, or portion thereof, but the minimum ADO at the completion of the GME period shall not be less than 2 years. The ADO for GME may be served concurrently with obligations incurred for DOD Sponsored pre-professional (undergraduate) or medical school education.

No active duty obligation for GME can be served concurrent with an ADO for a second period of GME, i.e., obligation for fellowship cannot be served concurrent with an obligation incurred for residency training.

2. **In a Civilian Facility (FTOS)**. A member subsidized by the DOD during training in a civilian facility shall incur an ADO of ½ year for each ½ year, or portion thereof, but the minimum ADO shall not be less than 2 years.

ADOs for FTOS training are added to obligation existing at the time training begins.

3. **In a Deferred Status (NADDS)**. A member deferred for specialty training incurs no additional obligation as long as a 2-year obligation exists at the time the training begins. Members with less than 2 years of active duty obligation will incur a minimum 2-year ADO.